

# Advice, Information and Instructions

ON

# INFLUENZA (La Grippe)



*Issued by*  
DEPARTMENT OF PUBLIC HEALTH  
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# INFLUENZA

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## A CONTAGIOUS DISEASE.

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Influenza, or "LaGrippe", as the disease was called in previous epidemics, is an extremely contagious disease. It is carried from the infected person to others by coughing, spitting and sneezing, and indirectly by the spray of patients infecting the hands, handkerchiefs, linens, table utensils or other articles.

The great rapidity with which influenza has spread through nations gave the impression that the infection was carried through the air. As a matter of fact the disease is transmitted only by contact. Epidemics have never spread faster than men travel.

Remember, there is nothing mysterious about influenza; but there is much that is deadly serious about it.

### Why Deaths Occur.

Most fatal cases of influenza are neglected cases of influenza. The disease itself is not particularly serious; but if neglected, serious and fatal complications occur.

Death is usually due to pneumonia and, occasionally, to inflammation of the ear or meningitis. Active tuberculosis often follows in the wake of an influenza epidemic. In most instances, the serious complications can be avoided by following simple instructions.

### The Spread of Influenza.

To acquire influenza, there must always be a source of infection. To avoid the disease, the thing to do is to avoid that source of infection. Remember that influenza is spread by spitters, sneezers, and coughers, and by infected hands, eating and drinking utensils.

Avoid contract with persons who have "colds". What appears to be an ordinary cold may be influenza.

Keep out of crowds. In every possible way, avoid close contact with others. Work, sleep and live in the fresh air. Avoid dusty places. Remember that the germs of influenza may be found in street dust, in the dried sputum of spitters.

Eat your meals regularly and have plenty of simple, nourishing food. Do not permit yourself to get over-tired. Avoid chilling the body. Dress comfortably.

Wet feet demand immediate attention. Remove wet clothing as soon as possible.

Keep your hands clean and keep your fingers out of your mouth.

Do not visit the sick. You may carry infection to them or they may infect you. During an epidemic of influenza, all sick persons should be regarded as possible victims of the disease and should be avoided. While most cases of influenza are marked by definite symptoms such as reddened eyes, discharging nose and aching muscles, these symptoms may all be absent. Regard all illness as suspicious and probably infectious when there are any cases of influenza in the community.

### IF YOU HAVE A "COLD".

If you have a "cold", particularly when influenza is prevalent, don't infect other people--keep away from them.

Go home, go to bed and stay in bed until the cold is entirely cured.

If you have fever with your cold, call a doctor at once.

Rest in bed is the best assurance against a serious attack.

Rest in bed is the best assurance against pneumonia and other serious complications.

Rest in bed is the best assurance of speedy recovery.

Rest in bed is the best assurance against the common serious after-effects such as "flu heart" and tuberculosis, and extreme exhaustion.

Rest in bed is the best way to avoid spreading infection to others.

Go to bed on first appearance of illness and remain in bed at least five days after fever has disappeared regardless of how well you may feel.

Follow your doctor's directions absolutely.

By all means avoid taking patent medicines or so-called "cold cures" or "grippe cures".

Avoid infecting others by keeping entirely away from the members of your family and requiring your attendant, while in the sick room, to wear face mask made of four thicknesses of gauze.

See that sputum and discharges from the nose and throat are received in clean cloths or paper napkins and that the cloths or napkins are promptly burned after being used.

Always sleep alone in case of any "cold". This is imperative in case influenza is prevalent.

If you have influenza, see that the case is reported to the local health authorities. If you do not have a physician, remember that the law requires your nurse, attendant, parent or any householder to report the case. Failure to report is punishable by a fine up to two hundred dollars, or imprisonment in the county jail or both. It is obligatory upon the local health officer to prosecute all persons guilty of violation of this rule.

Any person suffering from influenza must be quarantined until five (5) days after his temperature has returned to normal. This is

imperative both for the safety of the patient and for the protection of others.

Regardless of legal restrictions, bear this in mind! Any person suffering from a suspicious cold or influenza is an infection bearer and, if he goes wilfully about spreading his infection to others, with resulting sickness, misery and death, he is morally akin to him who puts poison in food or water.

### REMEMBER.

That influenza is very contagious.

That infection is carried through the coughing, sneezing or spitting of infected persons, and by infected hands, eating and drinking utensils.

That the best way to avoid influenza is to avoid close contact with people.

That deaths are usually caused by complications.

That these complications can be avoided by proper care.

Remember that every case of influenza has serious possibilities although it may appear to be only a mild and simple "cold".

### PRECAUTIONS TO BE TAKEN.

**By Mayors, City Councils, and Other Local Authorities.**—Immediately upon the appearance of influenza in the community or when influenza prevails in near-by communities, mayors, city councils and other public officials should (1) immediately organize a local public health service with sufficient appropriations to secure the full-time services of a competent medical health officer and necessary assistants, and to defray necessary operating expenses, (2) Preparation should be made for handling, and controlling the epidemic and furnishing food and other supplies and medical and nursing service for the sick and for the establishment of an emergency hospital.

In case the local medical profession is unable to meet the needs of the community, emergency assistance may be secured by application to the State Department of Public Health. Such application for medical assistance should be made by the mayor and at the time of making such application, there should be filed a definite statement showing the extent of the epidemic, the available local medical service and other essential facts.

Municipal officials will find that local Red Cross Chapters have been instructed to cooperate with them in combatting influenza and have been authorized to expend Red Cross funds for that purpose when public funds are not immediately available. Applications for Red Cross nurses or supplies, beyond those locally available, should be transmitted to the Director of the State Department of Public Health with full explanation as to the nature of local conditions. These requests, when accompanied by the satisfactory information, will be transmitted by the Director of the State Department of Public Health to the Central Division of the American Red Cross for emergency action.

There should be appointed a special influenza-pneumonia committee, including in its membership leading public-spirited citizens, business and

professional men and women, to assist the local authorities in preparing for, handling and controlling the epidemic, including the organization of nursing service and an emergency hospital. This committee should also include representatives of the local Red Cross Chapter and of those organizations controlling nurses or visiting nurse service.

**By Physicians and Nurses.**—(1) Immediate reporting of cases and suspected cases of influenza to the local health authorities as required by law. (2) Efficient isolation of patient and attendant as required by law. (3) Instruction of the attendant and other members of the household as to quarantine requirements and personal precautions to be taken calling special attention to the requirement that the patient must remain in quarantine until five days after the temperature has returned to normal. (4) Wearing approved freshly laundered or sterilized face masks by doctors and attendants while in the presence of a patient suffering from influenza or pneumonia, the face mask not to be removed from the sick room. (5) Exercising extreme care about cleanliness of the hands and sterility of tongue depressors, thermometers and other articles carried from patient to patient.

**By Local Health Authorities.**—(1) Rigid enforcement of the State regulations for the control of cases, suspected cases, attendants and contacts including reporting of cases, quarantine and other measures for control of infection, in no case releasing a patient from quarantine until the fifth day following the return of the patient's temperature to normal. (2) Prompt reporting to local school authorities of all cases or suspected cases developing on any premises where school children reside. (3) Close supervision over public transportation vehicles, churches, theatres, motion picture houses, dance halls, billiard rooms and other places of public assemblage, enforcing strict cleanliness, proper ventilation, avoidance of crowding, exclusion of persons suffering from colds or other suspicious illness and prohibiting attendance of persons residing on infected premises. (4) Close supervision of soft drink places, soda fountains, cafes and restaurants enforcing strict cleanliness and the sterilization of all glasses, silver ware and utensils. (5) Abolishment of the common drinking cup and roller towel. (6) Enforcement of adequate school inspection. (7) Daily report of cases to the State Department of Public Health.

**By Managers of Theatres and Other Places of Public Assemblage.**—(1) Strict compliance with requirement that persons suffering from colds or other suspicious illness and those residing on premises where influenza, pneumonia or other suspicious illness exists, shall be excluded or expelled from the audience or assemblage. Warning signs to this effect to be conspicuously displayed at the entrance, at the ticket window, and in motion picture theatres by projection on the picture screen. (2) Proper ventilation and cleanliness at all times. (3) Avoidance of crowding in the auditorium or entryways. (4) Abolishment of common drinking cup.

**By Proprietors of Billiard and Pool Halls.**—(1) Maintenance of proper sanitary conditions and thorough ventilation. (2) Avoidance of

crowding, not more than an average of four persons per billiard and pool table to be permitted in the billiard or pool room at one time. (3) Strict enforcement of the prohibition against spitting. (4) Exclusion of persons suffering from colds or suspicious illness and of those residing on infected premises. (5) Abolishment of common drinking cup and common towel.

**By Church Officers.**—(1) Avoidance of unnecessary assemblages and avoidance of crowding at any assemblage. (2) Avoidance of revivals or special meetings likely to draw unusual attendance. (3) Exclusion of all persons suffering from colds and other suspicious illness and those residing on infected premises. (4) Proper ventilation and cleanliness of church premises.

**By Employers of Labor.**—(1) Inspection service to detect and exclude from contact with other employees those suffering from colds or other suspicious illness, also to exclude those in contact with cases or suspected cases. (2) Inquiry into illness in employees' families and cause of absence of employees, requiring certificates of health in suspicious cases before permitting return to work. (3) Proper ventilation and sanitary conditions in work places. (4) Abolishment of common drinking cup and common towel.

**By Merchants.**—(1) Inspection service for employees, excluding all having colds or other suspicious illness and those in contact with known or suspicious cases. (2) Inquiry into health of employees' families and cause of absences of employees, requiring certificate of health from those under suspicion of being infection bearers. (3) Maintenance of proper ventilation and sanitary conditions in stores. (4) Abolishment of common drinking cup and common towel. (5) Avoidance of fatigue of employees. (6) Avoidance of chilling of employees located near entrances. (7) Avoidance of crowding.

**By School Authorities.**—(1) Adequate daily medical inspection of pupils and teachers, excluding those with colds or other suspicious illness and those residing on infected premises. (2) Daily inquiry into the health of families from which pupils and teachers come, excluding all pupils and teachers who may come from infected premises or other possible carriers. (3) Investigation of causes of absence of pupils and teachers, prohibiting return to school of possible carriers until danger is passed. (4) Proper ventilation of school buildings, open windows before and after classes and briefly during recess. (5) Absolute cleanliness of school buildings which implies frequent rubbing down of side walls with brush or dry cloths, scrubbing of all woodwork, seats and desks, scrubbing of all floors and dustless sweeping and dusting. With oiled floors scrubbing may be avoided provided that spraying with a five per cent cresol solution is substituted. (6) Maintenance of proper temperature ( $66^{\circ}$  to  $72^{\circ}$  Fahr.) and proper humidity in school rooms. (7) Proper sanitary condition of lockers, wash rooms, toilets and all surroundings. (8) Abolishment of common drinking cup and common towel.

In the absence of regular daily medical and professional nursing service, the teachers should be properly instructed in school inspection methods and should have a sick call immediately before the assembling of classes each day, excluding all children showing evidence of colds or other suspicious illness and all those coming from infected premises. Children excluded on account of illness of any kind should be cautioned to remain in their homes until the exact nature of the ailment is ascertained.

**By Hospital Authorities.**—(1) Immediate reporting by the superintendent or officer in charge of all cases of influenza admitted to or developing in the hospital to the local health authorities. (2) Prohibiting unnecessary visiting in hospitals, refusing admittance to those showing evidence of illness or residing on infected premises. (3) Requiring visitors who may be admitted to wear fresh, sterile face masks when in the presence of the patient and attendant and to take all other necessary precautions. (4) Daily or more frequent medical examination of all hospital nurses, attendants and employes. (5) Efficient isolation of all influenza patients and their attendants. (6) Efficient isolation of all pneumonia patients and their attendants and the immediate removal of all persons developing pneumonia from the influenza wards or other wards. (7) Enforced wearing of fresh, sterile face masks by all physicians, nurses and others attending influenza and pneumonia patients. (8) Placing of "sneeze sheets" between all beds in influenza and pneumonia wards. (9) Strict enforcement of proper disinfection and disposal of discharges and infective material or article. (10) Proper ventilation and proper temperature of wards with adequate protection against chilling patients and attendants.

**By the Public.**—(1) Keep out of crowds—indoors or outdoors. (2) Keep away from the persons having "common colds", shun the sneezer and cougher. (3) Keep a cool head, warm body and dry feet. (4) Avoid chilling the body. (5) Don't visit the sick. (6) Keep away from persons residing on infected premises. (7) Walk to work rather than ride on a crowded car. (8) Keep out of hot, stuffy or unventilated theatres, and other places of public assemblage. (9) Don't wear outdoor wraps or coats while indoors. (10) Don't go into outdoor air while overheated or with undergarments damp from perspiration. (11) Dress to suit the weather. (12) Don't let a person stand close to you while talking and spray you with infection. (13) Work, sleep and live in fresh air. (14) Avoid dusty places. (15) Eat regularly, plain nourishing food. (16) Avoid alcoholic drinks. (17) Avoid overwork and fatigue. (18) Keep your hands clean and keep your fingers out of your mouth. (19) Avoid the spitter and spit infected places.